

<i>SERFF Tracking Number:</i>	<i>BNLB-126689571</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>Bankers Life and Casualty Company</i>	<i>State Tracking Number:</i>	<i>46022</i>
<i>Company Tracking Number:</i>			
<i>TOI:</i>	<i>MS051 Individual Medicare Supplement - Standard Plans</i>	<i>Sub-TOI:</i>	<i>MS051.001 Plan A</i>
<i>Product Name:</i>	<i>GR-A06</i>		
<i>Project Name/Number:</i>	<i>/</i>		

Filing at a Glance

Company: Bankers Life and Casualty Company

Product Name: GR-A06

SERFF Tr Num: BNLB-126689571 State: Arkansas

TOI: MS051 Individual Medicare Supplement -
Standard Plans

SERFF Status: Closed-Approved-
Closed State Tr Num: 46022

Sub-TOI: MS051.001 Plan A

Co Tr Num:

State Status: Approved-Closed

Filing Type: Rate

Author: Diana Willis

Reviewer(s): Stephanie Fowler

Date Submitted: 06/23/2010

Disposition Date: 07/07/2010

Disposition Status: Approved-
Closed

Implementation Date Requested: 01/01/2011

Implementation Date: 01/01/2011

State Filing Description:

General Information

Project Name:

Status of Filing in Domicile: Pending

Project Number:

Date Approved in Domicile:

Requested Filing Mode: Review & Approval

Domicile Status Comments:

Explanation for Combination/Other:

Market Type: Individual

Submission Type: New Submission

Group Market Size:

Overall Rate Impact: 10.4%

Group Market Type:

Filing Status Changed: 07/07/2010

Explanation for Other Group Market Type:

State Status Changed: 07/07/2010

Deemer Date:

Created By: Diana Willis

Submitted By: Diana Willis

Corresponding Filing Tracking Number:

Filing Description:

INDIVIDUAL A&H 2011 Premium Rates for Standardized Medicare Supplement Policy Forms GR-A06A through GR-A06G, GR-A06FH, GR-A06J through GR-A06L

We are submitting the revised rates to be used beginning in 2011 for forms GR-A06A through GR-A06G, GR-A06FH and GR-A06J through GR-A06L. The forms were approved in your state on September 16, 1996. GR-A06FH was approved on March 9, 2000 and forms GR-A06J through GR-A06L were approved on October 27, 2005.

The forms are guaranteed renewable, fully medically underwritten, Standardized Medicare Supplement plans. The

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 Standard Plans
 Product Name: GR-A06
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various degrees of benefits provides by each plan are shown in the enclosed materials.

Due to the continued inflation in medical care costs, claim cost trend increases and poorer than anticipated experience, we must increase the rates for certain plans. The amounts and details of our requests are explained in the enclosed memorandum.

These revised rate scales are intended to be effective January 1, 2011 or later, depending on the premium mode option chosen and will apply to in-force. With these revised rates the anticipated loss ratio standard of your state for these forms will be met.

Because of the lead-time needed to implement these rates, we'd sincerely appreciate your expedited review for approval of this filing. Please feel free to correspond with us via SERFF, fax to (312) 396-5907 or e-mail d.willis@banklife.com.

Company and Contact

Filing Contact Information

Diana Willis, Actuarial Analyst II d.willis@banklife.com
 600 West Chicago Avenue 312-396-7658 [Phone]
 Chicago, IL 60610 312-396-5907 [FAX]

Filing Company Information

Bankers Life and Casualty Company	CoCode: 61263	State of Domicile: Illinois
600 West Chicago Avenue	Group Code: 233	Company Type:
Chicago, IL 60610	Group Name:	State ID Number:
(312) 396-6000 ext. [Phone]	FEIN Number: 36-0770740	

Filing Fees

Fee Required?	Yes
Fee Amount:	\$50.00
Retaliatory?	No
Fee Explanation:	\$50.00 per rate filing x 1 filing = \$50.00
Per Company:	No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
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<i>SERFF Tracking Number:</i>	<i>BNLB-126689571</i>	<i>State:</i>	<i>Arkansas</i>
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<i>Company Tracking Number:</i>			
<i>TOI:</i>	<i>MS051 Individual Medicare Supplement -</i>	<i>Sub-TOI:</i>	<i>MS051.001 Plan A</i>
	<i>Standard Plans</i>		
<i>Product Name:</i>	<i>GR-A06</i>		
<i>Project Name/Number:</i>	<i>/</i>		
Bankers Life and Casualty Company	\$50.00	06/23/2010	37435479

SERFF Tracking Number:	BNLB-126689571	State:	Arkansas
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Product Name:	GR-A06		
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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved-Closed	Stephanie Fowler	07/07/2010	07/07/2010

SERFF Tracking Number: BNLB-126689571 State: Arkansas
Filing Company: Bankers Life and Casualty Company State Tracking Number: 46022
Company Tracking Number:
TOI: MS051 Individual Medicare Supplement - Standard Plans Sub-TOI: MS051.001 Plan A
Product Name: GR-A06
Project Name/Number: /

Disposition

Disposition Date: 07/07/2010

Implementation Date: 01/01/2011

Status: Approved-Closed

Comment: The requested rate increases are approved to be implemented on or after January 1, 2011. This approval is subject to the following:

- Increases will not be given more frequently than once in a twelve-month period;
- The insured shall be notified by the insurer of its intention to increase the rate for renewal not less than thirty (30) days prior to the effective date of the renewal.

Company Name:	Overall % Indicated Change:	Overall % Rate Impact:	Written Premium Change for this Program:	# of Policy Holders Affected for this Program:	Written Premium for this Program:	Maximum % Change (where required):	Minimum % Change (where required):
Bankers Life and Casualty Company	10.400%	10.400%	\$441,074	1,878	\$	15.000%	0.000%

SERFF Tracking Number: BNLB-126689571 State: Arkansas

Filing Company: Bankers Life and Casualty Company State Tracking Number: 46022

Company Tracking Number:

TOI: MS051 Individual Medicare Supplement - Sub-TOI: MS051.001 Plan A
Standard Plans

Product Name: GR-A06

Project Name/Number: /

Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Health - Actuarial Justification	Approved	No
Rate	Rate Sheet Plan A	Approved	No
Rate	Rate Sheet Plan B	Approved	No
Rate	Rate Sheet Plan C	Approved	No
Rate	Rate Sheet Plan D	Approved	No
Rate	Rate Sheet Plan E	Approved	No
Rate	Rate Sheet Plan F	Approved	No
Rate	Rate Sheet Plan FH	Approved	No
Rate	Rate Sheet Plan G	Approved	No
Rate	Rate Sheet Plan J	Approved	No
Rate	Rate Sheet Plan K	Approved	No
Rate	Rate Sheet Plan L	Approved	No

SERFF Tracking Number:	BNLB-126689571	State:	Arkansas
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TOI:	MS051 Individual Medicare Supplement - Standard Plans	Sub-TOI:	MS051.001 Plan A
Product Name:	GR-A06		
Project Name/Number:	/		

Rate Information

Rate data applies to filing.

Filing Method:	SERFF
Rate Change Type:	Increase
Overall Percentage of Last Rate Revision:	9.570%
Effective Date of Last Rate Revision:	01/01/2010
Filing Method of Last Filing:	SERFF

Company Rate Information

Company Name:	Overall % Indicated Change:	Overall % Rate Impact:	Written Premium Change for this Program:	# of Policy Holders Affected for this Program:	Written Premium for this Program:	Maximum % Change (where required):	Minimum % Change (where required):
Bankers Life and Casualty Company	10.400%	10.400%	\$441,074	1,878		15.000%	0.000%

SERFF Tracking Number: BNLB-126689571 State: Arkansas

Filing Company: Bankers Life and Casualty Company State Tracking Number: 46022

Company Tracking Number:

TOI: MS051 Individual Medicare Supplement - Sub-TOI: MS051.001 Plan A
Standard Plans

Product Name: GR-A06

Project Name/Number: /

Rate/Rule Schedule

Schedule Item Status:	Document Name:	Affected Form Numbers: (Separated with commas)	Rate Action:	Rate Action Information:	Attachments
Approved 07/07/2010	Rate Sheet Plan A	GR-A06A	Revised	Previous State Filing Number: Percent Rate Change Request: 43261 7.500	Rates - Plan A.pdf Modal Rates - Plan A.pdf
Approved 07/07/2010	Rate Sheet Plan B	GR-A06B	Revised	Previous State Filing Number: Percent Rate Change Request: 43261 7.000	Rates - Plan B.pdf Modal Rates - Plan B.pdf
Approved 07/07/2010	Rate Sheet Plan C	GR-A06C	Revised	Previous State Filing Number: Percent Rate Change Request: 43261 12.000	Rates - Plan C.pdf Modal Rates - Plan C.pdf
Approved 07/07/2010	Rate Sheet Plan D	GR-A06D	Revised	Previous State Filing Number: Percent Rate Change Request: 43261 15.000	Rates - Plan D.pdf Modal Rates - Plan D.pdf
Approved 07/07/2010	Rate Sheet Plan E	GR-A06E	Revised	Previous State Filing Number: Percent Rate Change Request: 43261 7.000	Rates - Plan E.pdf Modal Rates - Plan E.pdf
Approved	Rate Sheet Plan F	GR-A06F	Revised	Previous State Filing Number: 43261	Rates - Plan F.pdf

SERFF Tracking Number: BNLB-126689571 State: Arkansas
Filing Company: Bankers Life and Casualty Company State Tracking Number: 46022
Company Tracking Number:
TOI: MS051 Individual Medicare Supplement - Sub-TOI: MS051.001 Plan A
Standard Plans
Product Name: GR-A06
Project Name/Number: /

07/07/2010				Percent Rate Change Request:	12.500	Modal Rates - Plan F.pdf
Approved 07/07/2010	Rate Sheet Plan FH	GR-A06FH	Revised	Previous State Filing Number: Percent Rate Change Request:	43261	Rates - Plan FH.pdf Modal Rates - Plan FH.pdf
Approved 07/07/2010	Rate Sheet Plan G	GR-A06G	Revised	Previous State Filing Number: Percent Rate Change Request:	43261 15.000	Rates - Plan G.pdf Modal Rates - Plan G.pdf
Approved 07/07/2010	Rate Sheet Plan J	GR-A06J	Revised	Previous State Filing Number: Percent Rate Change Request:	43261 9.500	Rates - Plan J.pdf Modal Rates - Plan J.pdf
Approved 07/07/2010	Rate Sheet Plan K	GR-A06K	Revised	Previous State Filing Number: Percent Rate Change Request:	43261 5.000	Rates - Plan K.pdf Modal Rates - Plan K.pdf
Approved 07/07/2010	Rate Sheet Plan L	GR-A06L	Revised	Previous State Filing Number: Percent Rate Change Request:	43261 2.000	Rates - Plan L.pdf Modal Rates - Plan L.pdf

Bankers Life and Casualty Company

Standardized Medicare Supplement Policy Form Series GR-A06

Annual Premium Rates* Male or Female

<u>Issue Age</u>	<u>Plan A</u>
Ages 65 & Over	\$2,631.69

*To Determine the Bank Draft (P.P.S.P.) or Payroll Deduction (P.R.D.), Semi-Annual, Quarterly or Monthly Direct Bill rates multiply the Annual Rates, as given above, by the appropriate factor shown below and add \$1.00. To determine the Triennial rates multiply the Annual Rates by the Triennial factor.

0.08583 for Monthly Bank Draft/Payroll Deduction; 0.515 for Semi-Annual; 0.2625 for Quarterly;
0.09167 for Monthly Direct Bill; 2.50 for Triennial

2011 STATE OF ARKANSAS
PREMIUMS

	Issue Age	ANNUAL	SEMI-ANNUAL	QUARTERLY	LIST BILL	P.P.S.P./P.R.D	TRIENNIAL
GR-A06A	65 & Older	2631.69	1356.29	691.91	242.24	226.88	6579.34

Bankers Life and Casualty Company

Standardized Medicare Supplement Policy Form Series GR-A06

Annual Premium Rates* Male or Female

<u>Issue Age</u>	<u>Plan B</u>
Ages 65 & Over	\$3,760.99

*To Determine the Bank Draft (P.P.S.P.) or Payroll Deduction (P.R.D.), Semi-Annual, Quarterly or Monthly Direct Bill rates multiply the Annual Rates, as given above, by the appropriate factor shown below and add \$1.00. To determine the Triennial rates multiply the Annual Rates by the Triennial factor.

0.08583 for Monthly Bank Draft/Payroll Deduction; 0.515 for Semi-Annual; 0.2625 for Quarterly;
0.09167 for Monthly Direct Bill; 2.50 for Triennial

2011 STATE OF ARKANSAS
PREMIUMS

	Issue Age	ANNUAL	SEMI-ANNUAL	QUARTERLY	LIST BILL	P.P.S.P./P.R.D	TRIENNIAL
GR-A06B	65 & Older	3760.99	1937.86	988.39	345.76	323.81	9402.64

Bankers Life and Casualty Company

Standardized Medicare Supplement
Policy Form Series GR-A06

Annual Premium Rates* Male or Female

<u>Issue Age</u>	<u>Plan C</u>
Ages 65 & Over	\$5,806.21

*To Determine the Bank Draft (P.P.S.P.) or Payroll Deduction (P.R.D.), Semi-Annual, Quarterly or Monthly Direct Bill rates multiply the Annual Rates, as given above, by the appropriate factor shown below and add \$1.00. To determine the Triennial rates multiply the Annual Rates by the Triennial factor.

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0.09167 for Monthly Direct Bill; 2.50 for Triennial

2011 STATE OF ARKANSAS
PREMIUMS

	Issue Age	ANNUAL	SEMI-ANNUAL	QUARTERLY	LIST BILL	P.P.S.P./P.R.D	TRIENNIAL
GR-A06C	65 & Older	5806.21	2991.12	1525.34	533.24	499.35	14515.78

Bankers Life and Casualty Company

Standardized Medicare Supplement
Policy Form Series GR-A06

Annual Premium Rates* Male or Female

<u>Issue Age</u>	<u>Plan D</u>
Ages 65 & Over	\$3,296.59

*To Determine the Bank Draft (P.P.S.P.) or Payroll Deduction (P.R.D.), Semi-Annual, Quarterly or Monthly Direct Bill rates multiply the Annual Rates, as given above, by the appropriate factor shown below and add \$1.00. To determine the Triennial rates multiply the Annual Rates by the Triennial factor.

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0.09167 for Monthly Direct Bill; 2.50 for Triennial

2011 STATE OF ARKANSAS
PREMIUMS

	Issue Age	ANNUAL	SEMI-ANNUAL	QUARTERLY	LIST BILL	P.P.S.P./P.R.D	TRIENNIAL
GR-A06D	65 & Older	3296.59	1698.70	866.47	303.19	283.95	8241.63

Bankers Life and Casualty Company

Standardized Medicare Supplement
Policy Form Series GR-A06

Annual Premium Rates* Male or Female

<u>Issue Age</u>	<u>Plan E</u>
Ages 65 & Over	\$4,033.93

*To Determine the Bank Draft (P.P.S.P.) or Payroll Deduction (P.R.D.), Semi-Annual, Quarterly or Monthly Direct Bill rates multiply the Annual Rates, as given above, by the appropriate factor shown below and add \$1.00. To determine the Triennial rates multiply the Annual Rates by the Triennial factor.

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2011 STATE OF ARKANSAS
PREMIUMS

	Issue Age	ANNUAL	SEMI-ANNUAL	QUARTERLY	LIST BILL	P.P.S.P./P.R.D	TRIENNIAL
GR-A06E	65 & Older	4033.93	2078.42	1060.05	370.78	347.24	10085.01

Bankers Life and Casualty Company

Standardized Medicare Supplement
Policy Form Series GR-A06

Annual Premium Rates* Male or Female

<u>Issue Age</u>	<u>Plan F</u>
Ages 65 & Over	\$3,456.63

*To Determine the Bank Draft (P.P.S.P.) or Payroll Deduction (P.R.D.), Semi-Annual, Quarterly or Monthly Direct Bill rates multiply the Annual Rates, as given above, by the appropriate factor shown below and add \$1.00. To determine the Triennial rates multiply the Annual Rates by the Triennial factor.

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2011 STATE OF ARKANSAS
PREMIUMS

	Issue Age	ANNUAL	SEMI-ANNUAL	QUARTERLY	LIST BILL	P.P.S.P./P.R.D	TRIENNIAL
GR-A06F	65 & Older	3456.63	1781.12	908.49	317.86	297.69	8641.72

Bankers Life and Casualty Company

Standardized Medicare Supplement Policy Form Series GR-A06

Annual Premium Rates* Male or Female

<u>Issue Age</u>	<u>Plan FH</u>
Ages 65 & Over	\$390.11

*To Determine the Bank Draft (P.P.S.P.) or Payroll Deduction (P.R.D.), Semi-Annual, Quarterly or Monthly Direct Bill rates multiply the Annual Rates, as given above, by the appropriate factor shown below and add \$1.00. To determine the Triennial rates multiply the Annual Rates by the Triennial factor.

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0.09167 for Monthly Direct Bill; 2.50 for Triennial

2011 STATE OF ARKANSAS
PREMIUMS

	Issue Age	ANNUAL	SEMI-ANNUAL	QUARTERLY	LIST BILL	P.P.S.P./P.R.D	TRIENNIAL
GR-A06FH	65 & Older	390.11	201.90	103.42	36.76	34.48	975.28

Bankers Life and Casualty Company

Standardized Medicare Supplement Policy Form Series GR-A06

Annual Premium Rates* Male or Female

<u>Issue Age</u>	<u>Plan G</u>
Ages 65 & Over	\$2,585.00

*To Determine the Bank Draft (P.P.S.P.) or Payroll Deduction (P.R.D.), Semi-Annual, Quarterly or Monthly Direct Bill rates multiply the Annual Rates, as given above, by the appropriate factor shown below and add \$1.00. To determine the Triennial rates multiply the Annual Rates by the Triennial factor.

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0.09167 for Monthly Direct Bill; 2.50 for Triennial

2011 STATE OF ARKANSAS
PREMIUMS

	Issue Age	ANNUAL	SEMI-ANNUAL	QUARTERLY	LIST BILL	P.P.S.P./P.R.D	TRIENNIAL
GR-A06G	65 & Older	2585.00	1332.24	679.65	237.96	222.87	6462.61

Bankers Life and Casualty Company

Standardized Medicare Supplement
Policy Form Series GR-A06

Annual Premium Rates* Male or Female

<u>Issue Age</u>	<u>Plan J</u>
Ages 65 & Over	\$2,449.62

*To Determine the Bank Draft (P.P.S.P.) or Payroll Deduction (P.R.D.), Semi-Annual, Quarterly or Monthly Direct Bill rates multiply the Annual Rates, as given above, by the appropriate factor shown below and add \$1.00. To determine the Triennial rates multiply the Annual Rates by the Triennial factor.

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2011 STATE OF ARKANSAS
PREMIUMS

	Issue Age	ANNUAL	SEMI-ANNUAL	QUARTERLY	LIST BILL	P.P.S.P./P.R.D	TRIENNIAL
GR-A06J	65 & Older	2449.62	1262.52	644.11	225.55	211.25	6124.15

Bankers Life and Casualty Company

Standardized Medicare Supplement
Policy Form Series GR-A06

Annual Premium Rates* Male or Female

<u>Issue Age</u>	<u>Plan K</u>
Ages 65 & Over	\$1,054.46

*To Determine the Bank Draft (P.P.S.P.) or Payroll Deduction (P.R.D.), Semi-Annual, Quarterly or Monthly Direct Bill rates multiply the Annual Rates, as given above, by the appropriate factor shown below and add \$1.00. To determine the Triennial rates multiply the Annual Rates by the Triennial factor.

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0.09167 for Monthly Direct Bill; 2.50 for Triennial

2011 STATE OF ARKANSAS
PREMIUMS

	Issue Age	ANNUAL	SEMI-ANNUAL	QUARTERLY	LIST BILL	P.P.S.P./P.R.D	TRIENNIAL
GR-A06K	65 & Older	1054.46	544.04	277.83	97.66	91.51	2636.21

Bankers Life and Casualty Company

Standardized Medicare Supplement Policy Form Series GR-A06

Annual Premium Rates* Male or Female

<u>Issue Age</u>	<u>Plan L</u>
Ages 65 & Over	\$1,448.82

*To Determine the Bank Draft (P.P.S.P.) or Payroll Deduction (P.R.D.), Semi-Annual, Quarterly or Monthly Direct Bill rates multiply the Annual Rates, as given above, by the appropriate factor shown below and add \$1.00. To determine the Triennial rates multiply the Annual Rates by the Triennial factor.

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2011 STATE OF ARKANSAS
PREMIUMS

	Issue Age	ANNUAL	SEMI-ANNUAL	QUARTERLY	LIST BILL	P.P.S.P./P.R.D	TRIENNIAL
GR-A06L	65 & Older	1448.82	747.13	381.37	133.81	125.35	3622.13